



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.)

OMB APPROVAL						
OMB Number: 3235-0076						
Expires:	April 30, 2008					
Estimated average burden						
hours per form16.00						
SEC USE ONLY						
Prefix	Serial					
DATE	RECEIVED					

Note and Warrant Financing					
Filing Under (Check box(es) that apply):	[] Rule 504	[] Rule 505	[X] Rule 506	[]Section 4(6)	[] ULOE
Type of Filing: [X] New Filing	[] Amendment				
	A. BASIC ID	ENTIFICATION	DATA		
1. Enter the information requested about	it the issuer				
Name of Issuer ([] check if this is an ame	endment and name has change	ed, and indicate ch	nange.)	070777	68
Angstro, Inc.				• -	<u></u>
Address of Executive Offices	(Number and Street, City,	State, Zip Code)	Telephone Numbe	r (Including Area Co	de)
169 University Avenue, 2nd Floor, Palo A			650-714-5529		
Address of Principal Business Operations	(Number and Street, City,	State, Zip Code	Telephone Numbe	r (Including Area Co	de)
(if different from Executive Offices)			TOUESSE		
			- 9 -	7	
Brief Description of Business			SEP 2.0 2007		
Disambiguation of search terms and news	alert systems		OC! 2.0 2007		
Type of Business Organization		•	THOMSON		
[X] corporation	[] limited partnersh	ip, already formed	TIMAN CONTRACTOR	[] other (please sp	ecify):
business trust	[] limited partnersh	ip, to be formed	LUANACIAT		•
	1	Month Y	ear		
Actual or Estimated Date of Incorporation	or Organization:	[04] [2	007]	[X] Actual	[] Estimated
Jurisdiction of Incorporation or Organization	-		vice abbreviation for S	State:	•
		; FN for foreign ju	ırisdiction)		[DE]

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will no result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition, of, 10% or more of a class of equity securitie of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner [] General and/or Managing Partner	[X] Executive Officer	[X] Director					
Full Name (Last name first, if in Khare, Rohit								
	(Number and Street, City, State, Zip Code)							
169 University Avenue, 2nd Floor, Palo Alto, CA 94301								
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner [] General and/or Managing Partner	[] Executive Officer	[] Director					
Full Name (Last name first, if in	dividual)							
Business or Residence Address	(Number and Street, City, State, Zip Code)							
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner [] General and/or Managing Partner	[] Executive Officer	[] Director					
Full Name (Last name first, if in		· · · · · · · · · · · · · · · · · · ·						
Business or Residence Address	(Number and Street, City, State, Zip Code)							
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner [] General and/or Managing Partner	[] Executive Officer	[] Director					
Full Name (Last name first, if in								
Business or Residence Address	(Number and Street, City, State, Zip Code)							
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner [] General and/or Managing Partner	[] Executive Officer	[] Director					
Full Name (Last name first, if in								
Business or Residence Address	(Number and Street, City, State, Zip Code)							
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner [] General and/or Managing Partner	[] Executive Officer	[] Director					
Full Name (Last name first, if in								
Business or Residence Address	(Number and Street, City, State, Zip Code)							
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner [] General and/or Managing Partner	[] Executive Officer	[] Director					
Full Name (Last name first, if in								
Business or Residence Address	(Number and Street, City, State, Zip Code)							
	(Use blank sheet, or copy and use additional copies	s of this sheet, as necessary.)						

	-				В. П	NFORMA	TION A	BOUT OF	FERING				_		
1.	Has the issue	r sold, or o	loes the is					itors in this mn 2, if fili						Yes	No [X]
2.	What is the n	ninimum i	nvestment	that will b	e accepted	from any	individual	?				•••••	••••	\$ <u>7</u> .	500.00
3.	Does the offe	ring perm	it joint ow	nership of	a single ur	nit?								Yes [X]	No []
4.	Enter the inforcemuneration agent of a brobe listed are	for solici oker or dea associated	tation of p aler registe persons o	urchasers i cred with the f such a br	in connect he SEC an	ion with sa d/or with a	iles of secu	urities in th tates, list tl	ne offering he name of	If a person the broke	on to be lis r or dealer	sted is an a	ssociated	perso	
Ful	l Name (Last n	ame first,	if individu	al)											
Bus	siness or Reside	ence Addr	ess (Numb	er and Stre	et, City, S	tate, Zip C	ode)								
Nar	ne of Associate	ed Broker	or Dealer								<u></u>				
Stat	tes in Which Po	erson Liste	d Has Sol	icited or In	tends to S	olicit Purch	nasers								
	(Check	"All State:	s" or check	c individua	l States)							***************************************	[1	All Sta	ites
	(AL) [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [ТХ]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full	l Name (Last n				[17]	[01]	[**]	[111]	["/"]		[,,,,]	["1]	I'.NI		
Bus	siness or Reside	ence Addr	ess (Numb	er and Stre	et, City, S	tate, Zip C	Code)		 		•				
Nar	ne of Associate	ed Broker	or Dealer	<u> </u>						 	•				
Stat	tes in Which Pe	erson Liste	d Has Sol	icited or In	tends to Se	olicit Purch	hasers								
	(Check	"All State:	s" or check	c individua	al States)								[]	All Sta	ites
	[AL] [1L] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
	l Name (Last n	ŕ		,											
Bus	siness or Reside	ence Addr	ess (Numb	er and Stro	eet, City, S	tate, Zip C	ode)								
Nar	ne of Associate	ed Broker	or Dealer												·
Stat	tes in Which Po	erson Liste	d Has Sol	icited or In	tends to S	olicit Purch	nasers								
	(Check	"All State	s" or check	c individua	l States)								[]	All Sta	ites
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
				(Use blank							sarv.)				

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSI	ES AND USE OF PROCEED	S
l.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and include in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	[] Common [X] Preferred		
	Convertible Securities (including warrants)	\$ 225,000,00	\$ 225,000.00
	Partnership Interests	\$	\$
	Other (Convertible Promissory Notes)	\$	5 335,000,00
	Total	\$ 225,000.00	\$225,000.00
_	Answer also in Appendix, Column 3, if filing Under ULOE		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amoun of Purchases
	Accredited Investors	2	\$ 225,000.00
	Non-accredited Investors		\$
	Total (for filings Under Rule 504 Only)	,	\$
			<u> </u>
3.	Answer also in Appendix, Column 4 if filing under ULOE If this filing is for an offering Under Rule 504 or 505, enter the information requested		
J.	for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
	Type of Security	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate		
	Transfer Agent's Fees	[]	\$
	Printing and Engraving Costs	[]	\$
	Legal Fees	[X]	\$5,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (Specify finder's fees separately)	* *	\$
	Other Expenses (identify):		\$
	t///		-

	C. OFFERING PRICE, NUMBER OF INVE	STORS, EXPENSI	ES AND USE O	F PROCEED	S	
	 b. Enter the difference between the aggregate offering price given in Question 1 and total expenses furnished in response to Part C – 0 difference is the "adjusted gross proceeds to the issuer." 	Question 4.a. This			\$	220,000.00
5.	Indicate below the amount of the adjusted gross proceeds to the proposed to be used for each of the purposes shown. If the amount not known, furnish an estimate and check the box to the left of the of the payments listed must equal the adjusted gross proceeds to the response to Part C – Question 4.b above.	for any purpose is stimate. The total				
			Payments to Directors, &		Paym	ents To Others
	Salaries and fees	[]		[]	\$	
	Research and Development	[]	\$	[]	s	
	Purchase, rental or leasing and installation of machinery	• •			_	
	and equipment		\$		<u>s</u>	
	Construction or leasing of plant buildings and facilities		\$	[]	\$	
	Acquisition of other businesses (including the value of securiti offering that may be used in exchange for the assets of sec					
	issuer pursuant to a merger)	[]	\$	[]	\$	
	Repayment of indebtedness	[]	\$	[]	\$ <u> </u>	
	Working capital and general corporate purposes	[]	\$	[X]	S	220,000.00
	Other (specify):	[]	\$	[]	\$	
	Column totals	[]	\$	[X]	s	220,000.00
	Total payments listed (column totals added)	***************************************	[X] \$	220,000.00)	
	D. FEDERA	L SIGNATURE				
constit	uer has duly caused this notice to be signed by the undersigned duly authors an undertaking by the issuer to furnish to the U.S. Securities and Except to any non-accredited investor pursuant to paragraph (b)(2) of Rule 50	change Commission,				
Issuer (Print or Type) o, Inc.	Signature U	60		Date Sept. 6	, 2007
Name (of Signer (Print or Type) Khare	Title of Signer (Prin	nt or Type)		4	

END

Attention

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)